

IN THE UNITED STATES DISTRICT COURT
FOR THE DISTRICT OF MARYLAND

MARC GASON 1-31-1960

#180574/160904

C/O W.C.I

13800 McMULLEN AVE. SW.

CUMBERLAND, MD 21502

(Full name, date of birth, identification #, address of petitioner)

Plaintiff,

RONY SECURE HOSPITAL BALTIMORE, MD
CORIZON HEALTH INC.

DR. BOLASI ONABABO, ASRESAHEGN GETACHEW
DR. LAWRENCE H. SCIRIO, DR. OKEFUNJE, YONAS SISAY, MD
HIRUY BISHAN, MD, MARYLAND DIVISION OF CORR.

6776 REISTERSTOWN RD BALTIMORE MD 21215

(Full name and address of respondent)

Defendant(s).

Case No.: PX-20-692
(Leave blank. To be filled in by Court.)

APR 03 2020

AT GREENBELT
CLERK U.S. DISTRICT COURT
DISTRICT OF MARYLAND

DEPT

COMPLAINT

I. Previous Lawsuits

A. Have you filed other cases in state or federal court dealing with the same facts as in this case or against the same defendants?

YES NO

B. If you answered YES, describe that case(s) in the spaces below.

1. Parties to the other case(s):

Plaintiff: _____

Defendant(s): _____

2. Court (if a federal court name the district; if a state court name the city or county):

3. Case No.: _____

4. Date filed: _____

5. Name of judge that handled the case: _____

6. Disposition (won, dismissed, still pending, on appeal): _____

7. Date of Disposition: _____

II. Administrative Proceedings

A. If you are a prisoner, did you file a grievance as required by the prison's administrative remedy procedures?

YES NO

1. If you answered YES:

a. What was the result? _____

b. Did you appeal? _____

YES NO

2. If you answered NO to either of the questions above, explain why: BECAUSE THE

DIVISION OF CORRECTION AND CORISON HAVE ADMITTED TO THEIR WRONG -
DOING

III. Statement of Claim

(Briefly state the facts of your case. Include dates, times, and places. Describe what each defendant did or how he/she is involved. If you are making a number of related claims, number and explain each claim in a separate paragraph.)

BEGINNING AROUND JULY 16TH 2018 TO ABOUT AUGUST 26TH 2018 I SUFFERED SEVERE
BLADDER AND URINARY TRACT INFECTIONS FROM FILTHY CONDITIONS AT DORSEY RUN
CORRECTIONAL FACILITY. I WAS BACK AND FORTH IN THE HOSPITAL WITH SEVERE
BLEEDING, EXCRUCIATING PAIN FROM CLOTS IN MY BLADDER ONLY TO BE SENT
BACK OVER AND OVER TO D.R.C.F. TO THIS DAY I STILL SUFFER BLADDER PROBLEMS

IV. Relief

(State briefly what you want the Court to do for you.)

I WANT THE COURT TO AWARD MONETARY, PUNITIVE COMPENSATORY AND ANY OTHER DAMAGES IT SEES FIT FOR MY PAIN AND SUFFERING I ENDURED FOR WEEKS. ALSO, TO APPOINT LEGAL COUNSEL AS PLAINTIFF IS UNABLE TO AFFORD SUCH

SIGNED THIS 28th day of MARCH, 2020.

Marc S. Cason
Signature of Plaintiff

MARC S. CASON SR
Printed Name

138100 McMULLEN Hwy SW
Address CUMBERLAND, MD. 21502

Telephone Number

Email Address